

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)
cps@dol.wa.gov

Print and scan or upgrade to

 Adobe Reader XI or above to fill it in
and save it.

Mall

 Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here _____

| | | | |
|---|---|--------------------------------------|--|
| Company/Agency name Tukwila Towing LLC | | Website tukwilatowing.com | |
| Contact name, Primary applicant and contract manager Almir Kudra | (Area code) Telephone number (206) 504-3122 | | Email (required) tukwilatowing@ymail.com |
| Contact name 2 (if applicable) | (Area code) Telephone number | | Email (required) |
| Physical address of business (number and street) 15250 32nd Ave S, Ste 68517 | | | |
| City Tukwila | State WA | ZIP code 98188 | |
| Mailing address of business (if different) | | | |
| City | State | | ZIP code |
| Provide one of these identifiers | Taxpayer Identification Number (TIN) | Employer Identification Number (EIN) | WA Unified Business Identifier (UBI) 604-069-603 |
| Answer the following | | | |
| Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). | | | |
| Vehicle towing and roadside assistance. Will use records to send notifications to registered owners and lienholders of towed vehicles after accidents. | | | |

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

Will contact registered owner and lienholder of towed vehicle by registered or certified mail. Will not provide information to any other businesses or other third parties.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

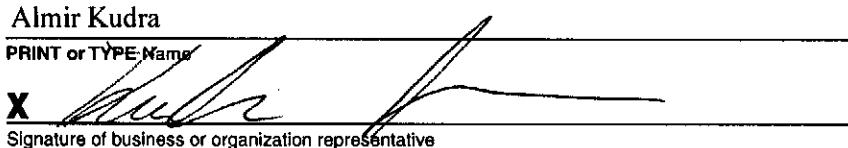
Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Almir Kudra
PRINT or TYPE Name
3/27/2018 King County X 
Date and place (county) signed
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

N/A

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

| | | | | |
|---|--|--------------|------------------------------|--------------------------|
| 1 | Legal business name | Contact name | Email | (Area code) Phone number |
| | Address, City, State, Zip code | | Subscriber's permissible use | |
| | Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 2 | Legal business name | Contact name | Email | (Area code) Phone number |
| | Address, City, State, Zip code | | Subscriber's permissible use | |
| | Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 3 | Legal business name | Contact name | Email | (Area code) Phone number |
| | Address, City, State, Zip code | | Subscriber's permissible use | |
| | Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 4 | Legal business name | Contact name | Email | (Area code) Phone number |
| | Address, City, State, Zip code | | Subscriber's permissible use | |
| | Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 5 | Legal business name | Contact name | Email | (Area code) Phone number |
| | Address, City, State, Zip code | | Subscriber's permissible use | |
| | Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 6 | Legal business name | Contact name | Email | (Area code) Phone number |
| | Address, City, State, Zip code | | Subscriber's permissible use | |
| | Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| 7 | Legal business name | Contact name | Email | (Area code) Phone number |
| | Address, City, State, Zip code | | Subscriber's permissible use | |
| | Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.